

00684.003286

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)

: Examiner: Robert B. Beatty

HIROOMI MATSUZAKI)

: Group Art Unit: 2852

Application No.: 09/988,342)

: Notice of Allowance: 4/22/03

Filed: November 19, 2001)

: Confirmation No. 8519

For: PROCESS CARTRIDGE, ELEC-)

: June 17, 2003

TROPHOGRAPHIC IMAGE)

FORMING APPARATUS AND)

CARTRIDGE MOUNTING METHOD :)

Commissioner for Patents

Mail Stop Issue Fee

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Allowance in the above-identified application.

☒ No additional fee is required.

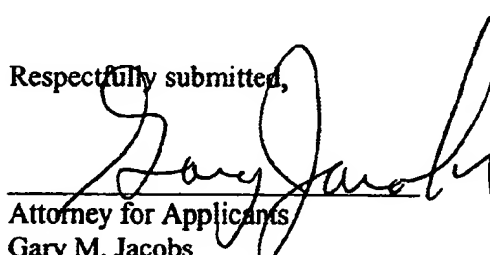
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	51	MINUS	56	= 0	x \$9 \$18	\$
INDEP. CLAIMS	3	MINUS	3	= 0	x \$42 \$84	\$
Fee for Multiple Dependent claims \$140*/\$280						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						\$

☐ *Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$ is enclosed.
- ☐ Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ to cover the fee for a month extension is enclosed.
- ☐ A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants
Gary M. Jacobs
Registration No.28,861

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

DC_MAIN 133828 v 1



Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Date 6 / 17 / 03
Mo. Day Yr.

Atty. Docket 02684-10286

Patent No. 09/988,342

Sir:

Kindly acknowledge receipt of the accompanying:

- ☐ Response to Official Action.
- ☐ Check for \$ _____ (claims fee)
- ☐ Petition under 37 CFR 1.136 and Check for \$ _____
- ☐ Notice of Appeal and Check for \$ _____
- ☐ Information Disclosure Statement, PTO-1449 and _____ documents
- ☐ Claim for priority and certified copies of _____ priority applications
- ☐ Issue fee transmittal and Check for \$ _____
- ☒ Other (specify) Amendment After Allowance

by placing your receiving date stamp hereon and returning to deliverer.

Atty. Gussling

Due Date 12/22/03
Mo. Day Yr.

00-0-000

PART B - FEE(S) TRANSMITTAL

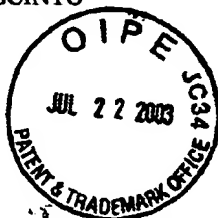
Complete and send this form, together with applicable fee(s), to: **Mail** Box ISSUE FEE
 Commissioner for Patents
 Washington, D.C. 20231
Fax (703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

05514 7590 04/22/2003

FITZPATRICK CELLA HARPER & SCINTO
 30 ROCKEFELLER PLAZA
 NEW YORK, NY 10112



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

09/988,342 11/19/2001 Hiroomi Matsuzaki 684.3286 8519

TITLE OF INVENTION: PROCESS CARTRIDGE, ELECTROPHOTOGRAPHIC IMAGE FORMING APPARATUS AND CARTRIDGE MOUNTING METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional NO \$1300 \$300 \$1600 07/22/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

BEATTY, ROBERT B 2852 399-111000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Fitzpatrick, Cella,
 2. Harper & Scinto
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Canon Kabushiki Kaisha

Tokyo, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) _____ (Date)

Gary M. Jacobs, Reg. No. 28,861 7/22/03

07/24/2003 HANRED2 00000068 09988342

01 FC:1501 1300.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 15.00 OP

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

00684.003286



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

HIROOMI MATSUZAKI

Application No.: 09/988,342

Filed: November 19, 2001

For: PROCESS CARTRIDGE, ELEC-
TROPHOTOGRAPHIC IMAGE
FORMING APPARATUS AND
CARTRIDGE MOUNTING
METHOD

)
:
) Examiner: Robert B. Beatty
:
) Group Art Unit: 2852
:
) Notice of Allowance: 4/22/03
:
) Confirmation No.: 8519
:
) July 22, 2003
:
)
:
)

Commissioner for Patents
Mail Stop Issue Fee
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR ACKNOWLEDGMENT AND ENTRY OF
June 17, 2003 AMENDMENT AFTER ALLOWANCE

Sir:

On June 17, 2003 Applicant filed an Amendment After Allowance. To-date,
Applicant has not received any communication acknowledging receipt, examination, or entry of
this document by the U.S. Patent and Trademark Office.

Accordingly, Applicant respectfully requests that the Examiner issue a paper
acknowledging receipt of the June 17, 2003 Amendment After Allowance. And, since the
Amendment After Allowance merely corrects minor claim informalities, Applicant also requests

Match and Return

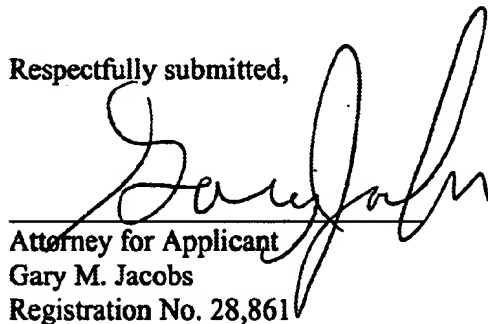
#17/ Nature:
H2K2 312 Andt.
W/ Mark Supp
Sub 312
8/18/03
Arund

Duplicate
of
6/17/03
312 amendment
AS

that this Amendment be entered in accordance with MPEP § 714.16. For the Examiner's convenience, attached is a duplicate, signed copy of the Amendment After Allowance, and a stamped postcard receipt establishing the filing of this document on that date.

Applicant's undersigned attorney may be reached in our Washington office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below listed address.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Gary M. Jacobs", is written over a horizontal line.

Attorney for Applicant
Gary M. Jacobs
Registration No. 28,861

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200